

EDITORIALS

The Elderly as Interdependent Persons

AS THE NUMBER of elderly persons continues to increase, the quality of life for this group of citizens assumes growing importance. This special issue of *THE WESTERN JOURNAL OF MEDICINE* addresses many aspects of the aging process and contains up-to-date information on the medical care of older persons. Less clearly expressed, but nevertheless running through many of the articles, is the notion of interdependence—interdependence among the multiple ailments so often afflicting an elderly person, interactions and interdependence among multiple medications and with altered physiologic states related to aging. Also, there is more than a hint of an interdependence of elderly persons with one another and with the human and physical aspects of their care and their environment. Yet one senses that this notion of interdependence is missing, or at least not emphasized, in many present-day approaches to the care of the elderly. They seem more directed toward maintaining the independence of an older person for as long as possible, but failing this to accept passive dependency as the more or less inescapable alternative. It seems that relatively little attention is being given to what might be thought of as a middle ground, the fostering of interdependency both to help sustain independence and to soften the indignity and perhaps even the cost of the more or less complete dependency that is the unhappy lot of so many of the nation's elderly today.

Quality of life and costs that can be borne are the central challenges to those in advanced years. These are very personal problems for older persons but they are also growing problems for society as a whole as the number of older persons has grown out of proportion to the rest of the population. A shortfall of resources to care for the elderly is predictable if it is not now here. These numbers are even now bringing about changes. It is evident that senior citizens will need to carry more

of the burden of their own maintenance and care. Already there are opportunities and even pressures for more senior citizens to carry more of the costs of their own maintenance by continuing to work and be productive further into the latter decades of their lives. By the same token it is beginning to be evident that as resources become less affordable for society as a whole, the elderly may have to do more to help take care of each other, to enhance the quality of their lives and to help make the available dollars go as far as possible. What appears to be needed is to further strengthen community and interpersonal action by the elderly in behalf of the elderly and to foster increasing interdependence among them as a replacement for increasing dependence and decreasing quality of life.

In recent times American society, with its focus on nuclear families and a youth-oriented culture, has tended to isolate the elderly both individually and collectively. But the trend now seems to be away from this isolation. Collectively, as their numbers have grown, senior citizens have begun to make their social, economic and political interdependence with society clearly evident. It is suggested that what may be needed now is to extend this focus and to view the elderly themselves as interdependent persons with something to give each other and to their local human and physical environment, and who together can do a great deal to enhance the quality of their care and their lives.

There is much in this issue of the journal that suggests that where interdependence can be substituted for both independence and dependence in the health care and attitudes of older persons, there can result an improvement in the quality of life in the declining years and there might even be some reduction in the costs of caring for this growing segment of the population as well.

—MSMW